

Fill in this information to identify your case:

United States Bankruptcy Court for the:

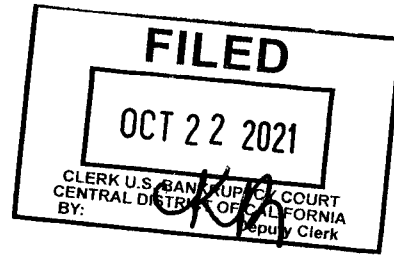
Central District of California

(State)

Case number (if known): Chapter you are filing under:

☐ Check if this is an
amended filing

- ☐ Chapter 7
☒ Chapter 11
☐ Chapter 12
☐ Chapter 13



Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself

About Debtor 1:

1. Your full name

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

VINCENT
First name
IKE
Middle name
WILFRED
Last name

Suffix (Sr., Jr., II, III)

About Debtor 2 (Spouse Only in a Joint Case):

First name

Middle name

Last name

Suffix (Sr., Jr., II, III)

2. All other names you have used in the last 8 years

Include your married or maiden names.

VINCENT
First name
IKE
Middle name
OKEKE
Last name

VINCENT
First name
IKECHUKWU
Middle name
WILFRED
Last name

First name

Middle name

Last name

First name

Middle name

Last name

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)

XXX - XX - 2832
OR
9 XX - XX - _____

XXX - XX - _____
OR
9 XX - XX - _____

About Debtor 1:

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business as names

☒ I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

About Debtor 2 (Spouse Only in a Joint Case):

☐ I have not used any business names or EINs.

Business name _____

Business name _____

EIN _____

EIN _____

5. Where you live

6116 ROBERTS PL.
Number Street

ETIWANDA CA 91739
City State ZIP Code
SAN BERNARDINO
County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

If Debtor 2 lives at a different address:

Number Street _____

City State ZIP Code _____

County _____

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number Street _____

P.O. Box _____

City State ZIP Code _____

Debtor 1

VINCENT THE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

6. Why you are choosing
this district to file for
bankruptcy

Check one:

- ☒ Over the last 180 days before filing this petition,
I have lived in this district longer than in any
other district.
- ☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Check one:

- ☐ Over the last 180 days before filing this petition,
I have lived in this district longer than in any
other district.
- ☐ I have another reason. Explain.
(See 28 U.S.C. § 1408.)

Part 2: Tell the Court About Your Bankruptcy Case

7. The chapter of the
Bankruptcy Code you
are choosing to file
under

Check one. (For a brief description of each, see *Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy* (Form 2010)). Also, go to the top of page 1 and check the appropriate box.

- ☐ Chapter 7
- ☒ Chapter 11
- ☐ Chapter 12
- ☐ Chapter 13

8. How you will pay the fee

- ☐ I will pay the entire fee when I file my petition. Please check with the clerk's office in your
local court for more details about how you may pay. Typically, if you are paying the fee
yourself, you may pay with cash, cashier's check, or money order. If your attorney is
submitting your payment on your behalf, your attorney may pay with a credit card or check
with a pre-printed address.

- ☒ I need to pay the fee in installments. If you choose this option, sign and attach the
Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).

- ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7.
By law, a judge may, but is not required to, waive your fee, and may do so only if your income is
less than 150% of the official poverty line that applies to your family size and you are unable to
pay the fee in installments). If you choose this option, you must fill out the *Application to Have the
Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

9. Have you filed for
bankruptcy within the
last 8 years?

☒ No

- ☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY
- District _____ When _____ Case number _____
MM / DD / YYYY

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?

☒ No

☐ Yes.

Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

Debtor _____ Relationship to you _____
District _____ When _____ Case number, if known _____
MM / DD / YYYY

11. Do you rent your residence?

☒ No.

Go to line 12.

☐ Yes.

Has your landlord obtained an eviction judgment against you?

☐ No.

Go to line 12.

☐ Yes.

Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it as part of this bankruptcy petition.

Part 3: Report About Any Businesses You Own as a Sole Proprietor

12. Are you a sole proprietor of any full- or part-time business?

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

☐ No.

Go to Part 4.

☒ Yes.

Name and location of business

CHSDORE LOGISTICS/HAULAGE
Name of business, if any

6116 ROBERTS PLACE
Number Street

ETIWANDA CA 91739
City State ZIP Code

Check the appropriate box to describe your business:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☒ None of the above

13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S.C. § 1182(1)?

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ No. I am not filing under Chapter 11.

☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

☐ Yes. I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and I do not choose to proceed under Subchapter V of Chapter 11.

☒ Yes. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I choose to proceed under Subchapter V of Chapter 11.

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention

14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

☒ No☐ Yes. What is the hazard? _____
_____If immediate attention is needed, why is it needed? _____

Where is the property? _____

Number

Street

City

State

ZIP Code

Debtor 1

First Name

Middle Name

Last Name

Case number (if known)

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

- ☒ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

- ☐ **I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

- ☐ **I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

- ☐ **I am not required to receive a briefing about credit counseling because of:**

- ☐ **Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

- ☐ **Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

- ☐ **Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1

VINCENT IRE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

Part 6: Answer These Questions for Reporting Purposes

16. What kind of debts do you have?

16a. Are your debts primarily consumer debts? *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

- ☒ No. Go to line 16b.
☐ Yes. Go to line 17.

16b. Are your debts primarily business debts? *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

- ☐ No. Go to line 16c.
☒ Yes. Go to line 17.

16c. State the type of debts you owe that are not consumer debts or business debts.

17. Are you filing under Chapter 7?

☒ No. I am not filing under Chapter 7. Go to line 18.

Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?

- ☐ Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?
- ☐ No
☐ Yes

18. How many creditors do you estimate that you owe?

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> 1-49 | <input type="checkbox"/> 1,000-5,000 | <input type="checkbox"/> 25,001-50,000 |
| <input type="checkbox"/> 50-99 | <input type="checkbox"/> 5,001-10,000 | <input type="checkbox"/> 50,001-100,000 |
| <input type="checkbox"/> 100-199 | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999 | | |

19. How much do you estimate your assets to be worth?

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

20. How much do you estimate your liabilities to be?

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Part 7: Sign Below

For you

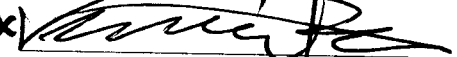
I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11, 12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x 

Signature of Debtor 1

Executed on 10/20/21
MM / DD / YYYY

x

Signature of Debtor 2

Executed on _____
MM / DD / YYYY

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

**For you if you are filing this
bankruptcy without an
attorney**

**If you are represented by
an attorney, you do not
need to file this page.**

The law allows you, as an individual, to represent yourself in bankruptcy court, but **you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.**

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. **Bankruptcy fraud is a serious crime; you could be fined and imprisoned.**

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious action with long-term financial and legal consequences?

☐ No
☒ Yes

Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?

☐ No
☒ Yes

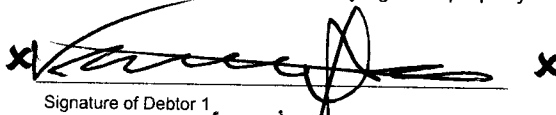
Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy forms?

☒ No

☐ Yes. Name of Person _____

Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

By signing here, I acknowledge that I understand the risks involved in filing without an attorney. I have read and understood this notice, and I am aware that filing a bankruptcy case without an attorney may cause me to lose my rights or property if I do not properly handle the case.

 x

Signature of Debtor 1

Signature of Debtor 2

Date

10/20/2021
MM/DD/YYYY

Date

MM/DD/YYYY

Contact phone

909 600 4619

Contact phone

Cell phone

909 600 4619

Cell phone

Email address

vikewilf@gmail.com

Email address

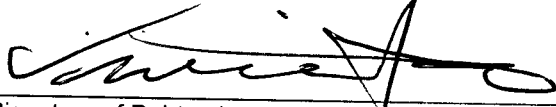
**STATEMENT OF RELATED CASES
INFORMATION REQUIRED BY LBR 1015-2
UNITED STATES BANKRUPTCY COURT, CENTRAL DISTRICT OF CALIFORNIA**

1. A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, his/her spouse, his or her current or former domestic partner, an affiliate of the debtor, any copartnership or joint venture of which debtor is or formerly was a general or limited partner, or member, or any corporation of which the debtor is a director, officer, or person in control, as follows: (Set forth the complete number and title of each such of prior proceeding, date filed, nature thereof, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- converted to Chapt. 7 and discharged 12/2012*
Judge Johnson
Chapt 13 filed 2012
2. (If petitioner is a partnership or joint venture) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor or an affiliate of the debtor, or a general partner in the debtor, a relative of the general partner, general partner of, or person in control of the debtor, partnership in which the debtor is a general partner, general partner of the debtor, or person in control of the debtor as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of the proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending and, if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- None*
3. (If petitioner is a corporation) A petition under the Bankruptcy Act of 1898 or the Bankruptcy Reform Act of 1978 has previously been filed by or against the debtor, or any of its affiliates or subsidiaries, a director of the debtor, an officer of the debtor, a person in control of the debtor, a partnership in which the debtor is general partner, a general partner of the debtor, a relative of the general partner, director, officer, or person in control of the debtor, or any persons, firms or corporations owning 20% or more of its voting stock as follows: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- None*
4. (If petitioner is an individual) A petition under the Bankruptcy Reform Act of 1978, including amendments thereof, has been filed by or against the debtor within the last 180 days: (Set forth the complete number and title of each such prior proceeding, date filed, nature of proceeding, the Bankruptcy Judge and court to whom assigned, whether still pending, and if not, the disposition thereof. If none, so indicate. Also, list any real property included in Schedule A/B that was filed with any such prior proceeding(s).)
- None*

I declare, under penalty of perjury, that the foregoing is true and correct.

Executed at ETIWANDA, California

Date: 10/20/2021


Signature of Debtor 1

Signature of Debtor 2

This form is mandatory. It has been approved for use in the United States Bankruptcy Court for the Central District of California.

Fill in this information to identify your case:

Debtor 1 VINCENT IRE WILFRED
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Central District of California
Case number
(If known)

☐ Check if this is an amended filing

Official Form 104

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

12/15

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an *insider*. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

Part 1: List the 20 Unsecured Claims in Order from Largest to Smallest. Do Not Include Claims by Insiders.

Unsecured claim

1	<u>Select Portfolio Servicing</u> Creditor's Name <u>P.O. Box 65250</u> Number Street <u>Salt Lake City UT</u> City State ZIP Code <u>CSD</u> Contact <u>800 258 8602</u> Contact phone	What is the nature of the claim? <u>Mortgage loan</u> \$ <u>\$433,199.67</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <input checked="" type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured): \$ <u>1,323,199.67</u> Value of security: - \$ <u>890,000</u> Unsecured claim \$ <u>433,199.67</u>
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2	<u>2nd Chance Mortgages</u> Creditor's Name <u>23580 Alessandro Bl.</u> Number Street <u>#9818</u> City State ZIP Code <u>Moreno Valley CA 92552</u> Contact <u>Bella Baca</u> <u>(688) 901 8656</u> Contact phone	What is the nature of the claim? <u>Mortgage loan</u> \$ <u>114,929.09</u> As of the date you file, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <input type="checkbox"/> None of the above apply Does the creditor have a lien on your property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Total claim (secured and unsecured): \$ <u>114,929.09</u> Value of security: - \$ <u>890,000</u> Unsecured claim \$ <u>114,929.09</u>
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Debtor 1

VINCENT IKE WILFRED

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

3 Octavio Jimenez
Creditor's Name
962 E. D Street
Number Street
Ontario CA 91767
City State ZIP Code
O G Law
Contact
951 444 7041
Contact phone

What is the nature of the claim? Judgement

\$ 48,000

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☒ Yes. Total claim (secured and unsecured): \$ 48,000
Value of security: - \$ 0
Unsecured claim \$ 48,000

4 Toben Enterprises
Creditor's Name
P.O. Box 1246
Number Street
San Ramon CA 94583
City State ZIP Code
Bob Andrews
Contact
800 280 4377
Contact phone

What is the nature of the claim? Student loan

\$ 4899.16

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☒ Yes. Total claim (secured and unsecured): \$ 4899.16
Value of security: - \$ 0
Unsecured claim \$ 4899.16

5 LCSA
Creditor's Name
5500 S. Eastern Ave
Number Street
Commerce CA 90040
City State ZIP Code
866 901 3212
Contact
866 901 3212
Contact phone

What is the nature of the claim? Interest Balance

\$ 14,141.11

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ 14,141.11
Value of security: - \$ 0
Unsecured claim \$ 14,141.11

6 TFC Corporation
Creditor's Name
P.O. Box 579
Number Street
San Ramon CA 94583
City State ZIP Code
Mike Davis
Contact
800 872 9832
Contact phone

What is the nature of the claim? Student loan

\$ 5769.16

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☒ None of the above apply

Does the creditor have a lien on your property?

- ☒ No
☐ Yes. Total claim (secured and unsecured): \$ 5769.16
Value of security: - \$ 0
Unsecured claim \$ 5769.16

7
Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim?

\$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

8

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

9

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

10

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

11

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

12

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$
As of the date you file, the claim is: Check all that apply.
☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply
Does the creditor have a lien on your property?
☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Unsecured claim

13

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

14

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

15

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

16

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

17

Creditor's Name
Number Street
City State ZIP Code
Contact
Contact phone

What is the nature of the claim? \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$
Value of security: - \$
Unsecured claim \$

Debtor 1

First Name Middle Name Last Name

Case number (if known) _____

Unsecured claim

18

Creditor's Name _____
Number Street _____
City State ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

19

Creditor's Name _____
Number Street _____
City State ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

20

Creditor's Name _____
Number Street _____
City State ZIP Code _____
Contact _____
Contact phone _____

What is the nature of the claim? _____

\$ _____

As of the date you file, the claim is: Check all that apply.

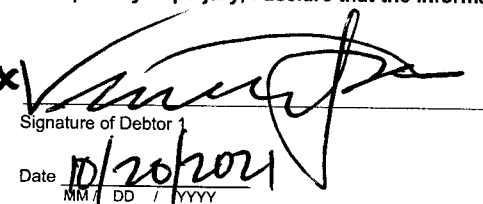
- ☐ Contingent
☐ Unliquidated
☐ Disputed
☐ None of the above apply

Does the creditor have a lien on your property?

- ☐ No
☐ Yes. Total claim (secured and unsecured): \$ _____
Value of security: - \$ _____
Unsecured claim \$ _____

Part 2: Sign Below

Under penalty of perjury, I declare that the information provided in this form is true and correct.

x  x
Signature of Debtor 1
Date 10/20/2021
MM / DD / YYYY

Signature of Debtor 2

Date
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 VINCENT JOE WILFRED
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the Central District of California

Case number _____
(If known)

☐ Check if this is an
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Part 1: Summarize Your Assets

Your assets

Value of what you own

1. *Schedule A/B: Property* (Official Form 106A/B)

1a. Copy line 55, Total real estate, from *Schedule A/B* \$ _____

1b. Copy line 62, Total personal property, from *Schedule A/B* \$ _____

1c. Copy line 63, Total of all property on *Schedule A/B* \$ _____

Part 2: Summarize Your Liabilities

Your liabilities

Amount you owe

2. *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D)

2a. Copy the total you listed in Column A, *Amount of claim*, at the bottom of the last page of Part 1 of *Schedule D* \$ _____

3. *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 106E/F)

3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of *Schedule E/F* \$ _____

3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of *Schedule E/F* + \$ _____

Your total liabilities

\$ _____

Part 3: Summarize Your Income and Expenses

4. *Schedule I: Your Income* (Official Form 106I)

Copy your combined monthly income from line 12 of *Schedule I* \$ _____

5. *Schedule J: Your Expenses* (Official Form 106J)

Copy your monthly expenses from line 22c of *Schedule J* \$ _____

Debtor 1

VINCENT JKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

Part 4: Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

- ☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
☐ Yes

7. What kind of debt do you have?

- ☐ **Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
☐ **Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ _____

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

Total claim

From Part 4 on Schedule E/F, copy the following:

- 9a. Domestic support obligations (Copy line 6a.) \$ _____
- 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$ _____
- 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ _____
- 9d. Student loans. (Copy line 6f.) \$ _____
- 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$ _____
- 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) + \$ _____
- 9g. **Total.** Add lines 9a through 9f. \$ _____

Fill in this information to identify your case and this filing:

Debtor 1 VINCENT IKE WILFRED
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the Central District of California
Case number _____

☐ Check if this is an amended filing

Official Form 106A/B

Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- ☐ No. Go to Part 2.
☒ Yes. Where is the property?

1.1. 6116 ROBERTS PL
Street address, if available, or other description

ETIWANDA CA 91739
City State ZIP Code

San Bernardino
County

What is the property? Check all that apply.

- ☒ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$ 890,000
Current value of the portion you own? \$ 890,000

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Fee Simple

☒ Check if this is community property (see instructions)

If you own or have more than one, list here:

1.2. _____
Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other _____

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number: _____

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? _____
Current value of the portion you own? _____

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

☐ Check if this is community property (see instructions)

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

1.3.

Street address, if available, or other description

City State ZIP Code

County

What is the property? Check all that apply.

- ☐ Single-family home
☐ Duplex or multi-unit building
☐ Condominium or cooperative
☐ Manufactured or mobile home
☐ Land
☐ Investment property
☐ Timeshare
☐ Other

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Other information you wish to add about this item, such as local property identification number:

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$ \$

Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property (see instructions)

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.

\$890,000

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- ☐ No
☒ Yes

3.1. Make:

Model:

Year:

Approximate mileage:

Other information:

MZB
E430
1998
240,000

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$1500 \$1500

If you own or have more than one, describe here:

3.2. Make:

Model:

Year:

Approximate mileage:

Other information:

FORD
EXPEDITION
1999
169,000

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Check if this is community property (see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? Current value of the portion you own?

\$1600 \$1600

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

3.3. Make:

Model:

Year:

Approximate mileage:

Other information:

BMW
2004 1740
2004
143,000

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 3700 \$ 3700

3.4. Make:

Model:

Year:

Approximate mileage:

Other information:

Freighliner
Cascadia
2016
829,169

Who has an interest in the property? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 59,000 \$ 59,000

4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- ☐ No
☐ Yes

4.1. Make:

Model:

Year:

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

If you own or have more than one, list here:

4.2. Make:

Model:

Year:

Other information:

Who has an interest in the property? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ _____ \$ _____

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

\$ 65,200

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

Part 3: Describe Your Personal and Household Items

Do you own or have any legal or equitable interest in any of the following items?

Current value of the
portion you own?
Do not deduct secured claims
or exemptions.

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

☐ No

☒ Yes. Describe.....

micro wave, stove, furniture, kitchenware \$ 1200

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

☐ No

☒ Yes. Describe.....

Television, audio, video and computer \$ 1500

8. Collectibles of value

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

☐ No

☐ Yes. Describe.....

\$

9. Equipment for sports and hobbies

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

☐ No

☒ Yes. Describe.....

Musical Instruments, Cameras, bicycles \$ 2000

10. Firearms

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☐ No

☐ Yes. Describe.....

\$

11. Clothes

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

☐ No

☒ Yes. Describe.....

Clothes, shoes, Coats + Jackets \$ 1000

12. Jewelry

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

☐ No

☐ Yes. Describe.....

\$

13. Non-farm animals

Examples: Dogs, cats, birds, horses

☐ No

☐ Yes. Describe.....

\$

14. Any other personal and household items you did not already list, including any health aids you did not list

☐ No

☒ Yes. Give specific
information.

Medical Equipments, Tool box, Generator \$ 5000

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

→

\$ 10,700

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the
portion you own?
Do not deduct secured claims
or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

☐ No

☒ Yes

Cash: \$ 40

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

☐ No

☒ Yes

Institution name:

17.1. Checking account:		\$ 3500
17.2. Checking account:		\$
17.3. Savings account:		\$ 900
17.4. Savings account:		\$
17.5. Certificates of deposit:		\$
17.6. Other financial account:		\$
17.7. Other financial account:		\$
17.8. Other financial account:		\$
17.9. Other financial account:		\$

18. Bonds, mutual funds, or publicly traded stocks

Examples: Bond funds, investment accounts with brokerage firms, money market accounts

☒ No

☐ Yes

Institution or issuer name:

	\$
	\$
	\$

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture

☐ No

☒ Yes. Give specific
information about
them.

Name of entity:

CHUSDORF GLOBAL SERVICES LTD
MERCIKE MEDICAL SERVICES
RRR WILMERC NIG. DREDGING

% of ownership:

100 %
100 %
95 %

\$ 0
\$ 50,000
\$ 35,000

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

20. Government and corporate bonds and other negotiable and non-negotiable instruments

Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders.
Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.

☒ No

☐ Yes. Give specific
information about
them.....

Issuer name:

\$ 0
\$ 0
\$ 0

21. Retirement or pension accounts

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

☒ No

☐ Yes. List each
account separately.

Type of account: Institution name:

401(k) or similar plan: _____

Pension plan: _____

IRA: _____

Retirement account: _____

Keogh: _____

Additional account: _____

Additional account: _____

\$ 0
\$ 0
\$ 0
\$ 0
\$ 0
\$ 0
\$ 0

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company
Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications
companies, or others

☒ No

☐ Yes

Institution name or individual:

Electric: _____

Gas: _____

Heating oil: _____

Security deposit on rental unit: _____

Prepaid rent: _____

Telephone: _____

Water: _____

Rented furniture: _____

Other: _____

\$ 0
\$ 0
\$ 0
\$ 0
\$ 0
\$ 0
\$ 0
\$ 0

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☒ No

☐ Yes

Issuer name and description:

\$ 0
\$ 0
\$ 0

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

24. **Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

☒ No

☐ Yes

Institution name and description. Separately file the records of any interests. 11 U.S.C. § 521(c)

\$ 0
\$ 0
\$ 0

25. **Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

☒ No

☐ Yes. Give specific information about them....

\$ 0

26. **Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

☒ No

☐ Yes. Give specific information about them....

\$ 0

27. **Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

☒ No

☐ Yes. Give specific information about them....

\$ 0

Money or property owed to you?

Current value of the portion you own?
Do not deduct secured claims or exemptions.

28. **Tax refunds owed to you**

☒ No

☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.

Federal:

\$ 0

State:

\$ 0

Local:

\$ 0

29. **Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

☒ No

☐ Yes. Give specific information.....

Alimony:

\$ 0

Maintenance:

\$ 0

Support:

\$ 0

Divorce settlement:

\$ 0

Property settlement:

\$ 0

30. **Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☒ No

☐ Yes. Give specific information.....

\$ 0

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

31. Interests in insurance policies

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

☒ No

☐ Yes. Name the insurance company of each policy and list its value. ...

Company name:

Beneficiary:

Surrender or refund value:

\$ 0

\$ 0

\$ 0

32. Any interest in property that is due you from someone who has died

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

☒ No

☐ Yes. Give specific information.

\$ 0

33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment

Examples: Accidents, employment disputes, insurance claims, or rights to sue

☐ No

☒ Yes. Describe each claim.

Fight to sue in 3 lawsuits

\$ 13,000

34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

☐ No

☒ Yes. Describe each claim.

Counter claim

\$ 10,000

35. Any financial assets you did not already list

☒ No

☐ Yes. Give specific information.

\$ 0

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here

→

\$ 112,040

Part 5:

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

☐ No. Go to Part 6.

☐ Yes. Go to line 38.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

☒ No

☐ Yes. Describe.

\$ 0

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

☐ No

☒ Yes. Describe.

medical Equipments, Computer, Generator

\$ 15,000

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

☐ No

☒ Yes. Describe.....

DREDGING MACHINE, GENERATORS, TOOLS \$ 150,000

41. Inventory

☐ No

☒ Yes. Describe.....

MEDICAL SUPPLY \$ 30,000

42. Interests in partnerships or joint ventures

☐ No

☐ Yes. Describe..... Name of entity:

% of ownership:

Name of entity	% of ownership	\$
	%	\$ 0
	%	\$ 0
	%	\$ 0

43. Customer lists, mailing lists, or other compilations

☒ No

☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

☐ No

☐ Yes. Describe.....

\$ 0

44. Any business-related property you did not already list

☒ No

☐ Yes. Give specific information

Information	\$
	\$ 0
	\$ 0
	\$ 0
	\$ 0
	\$ 0
	\$ 0

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here

\$ 195,000

Part 6:

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

☒ No. Go to Part 7.

☐ Yes. Go to line 47.

Current value of the portion you own?

Do not deduct secured claims or exemptions.

47. Farm animals

Examples: Livestock, poultry, farm-raised fish

☒ No

☐ Yes.....

\$ 0

Debtor 1

VINCENT
First Name Middle Name Last Name
IKE WILFRED

Case number (if known)

48. Crops—either growing or harvested

☒ No

☐ Yes. Give specific information.....

\$

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

☒ No

☐ Yes.....

\$

50. Farm and fishing supplies, chemicals, and feed

☒ No

☐ Yes.....

\$

51. Any farm- and commercial fishing-related property you did not already list

☒ No

☐ Yes. Give specific information.....

\$

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here

→

\$

Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

☒ No

☐ Yes. Give specific information.....

\$

\$

\$

54. Add the dollar value of all of your entries from Part 7. Write that number here

→

\$

Part 8: List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2

→

\$ 890,000

56. Part 2: Total vehicles, line 5

\$ 105,200

57. Part 3: Total personal and household items, line 15

\$ 10,700

58. Part 4: Total financial assets, line 36

\$ 112,040

59. Part 5: Total business-related property, line 45

\$ 195,000

60. Part 6: Total farm- and fishing-related property, line 52

\$ 0

61. Part 7: Total other property not listed, line 54

+ \$ 0

62. Total personal property. Add lines 56 through 61.

\$ 382,940

Copy personal property total → + \$ 382,940

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$ 1,272,940

Fill in this information to identify your case:

Debtor 1	VINCENT	KE	WILFRED
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)			
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Central District of California			
Case number (if known)			

☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own Copy the value from <i>Schedule A/B</i>	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Tools & Equipment Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Furnishings Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: Clothes Line from <i>Schedule A/B</i> : _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)

- ☐ No
☒ Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
☐ No
☒ Yes

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Brief description: _____ Line from Schedule A/B: _____	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1 VINCENT JKE WILFRED
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number
(If known)

☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. Do any creditors have claims secured by your property?

- ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- ☐ Yes. Fill in all of the information below.

Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
\$1323,199	\$890,000	\$433,199

2.1 Select Portfolio Serv

Describe the property that secures the claim:

Creditor's Name
P.O. Box 65277
Number Street

6116 ROBERTS PL
ETIWANDA CA 91739

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Salt Lake City UT 84115
City State ZIP Code

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☒ Check if this claim relates to a community debt

Date debt was incurred 12/30/2005

Last 4 digits of account number 8073

2.2 2nd Chance Mortgage

Describe the property that secures the claim:

\$114,929	\$890,000	\$114,929
-----------	-----------	-----------

Creditor's Name
23580 Alessandro
Number Street

6116 Roberts PL
ETIWANDA CA 91739

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Blvd #9818
Moreno Valley CA 92552
City State ZIP Code

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

☒ Check if this claim relates to a community debt

Date debt was incurred 2/23/2007

Last 4 digits of account number 9823

Add the dollar value of your entries in Column A on this page. Write that number here:

\$1438,128

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 1:

Additional Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Column A

Amount of claim
Do not deduct the value of collateral.

Column B

Value of collateral that supports this claim

Column C

Unsecured portion
If any

OCTAVIO JIMENEZ

Creditor's Name

962 E. D STREET

Number

Street

Describe the property that secures the claim:

\$ **96,000**

\$ **890,000**

96,000

ONTARIO CA 91767

City

State

ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☒ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☒ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☒ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Creditor's Name

Number Street

City

State

ZIP Code

Describe the property that secures the claim:

\$ \$ \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Creditor's Name

Number Street

City

State

ZIP Code

Describe the property that secures the claim:

\$ \$ \$

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Nature of lien. Check all that apply.

- ☐ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset)

Who owes the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ **96,000**

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$ **4534,128**

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

☐

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

☐

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

☐

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

☐

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

☐

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

☐

Name

Number Street

City

State

ZIP Code

On which line in Part 1 did you enter the creditor? _____

Last 4 digits of account number _____

Fill in this information to identify your case:

Debtor 1
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: District of
Case number
(If known)

☐ Check if this is an amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- ☐ No. Go to Part 2.
☐ Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.
(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

	Total claim	Priority amount	Nonpriority amount
2.1			
Priority Creditor's Name	Last 4 digits of account number	\$	\$
Number Street	When was the debt incurred?		
City State ZIP Code	As of the date you file, the claim is: Check all that apply		
Who incurred the debt? Check one.	<input type="checkbox"/> Contingent		
<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated		
<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Disputed		
<input type="checkbox"/> Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations		
<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Taxes and certain other debts you owe the government		
Is the claim subject to offset?	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
<input type="checkbox"/> No	<input type="checkbox"/> Other. Specify		
<input type="checkbox"/> Yes			

2.2	Priority Creditor's Name	Last 4 digits of account number	\$	\$
	Number Street	When was the debt incurred?		
	City State ZIP Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.	<input type="checkbox"/> Contingent		
	<input type="checkbox"/> Debtor 1 only	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Debtor 2 only	<input type="checkbox"/> Disputed		
	<input type="checkbox"/> Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations		
	<input type="checkbox"/> Check if this claim is for a community debt	<input type="checkbox"/> Taxes and certain other debts you owe the government		
	Is the claim subject to offset?	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated		
	<input type="checkbox"/> No	<input type="checkbox"/> Other. Specify		
	<input type="checkbox"/> Yes			

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.

Total claim
Priority
amount
Nonpriority
amount

☐

Priority Creditor's Name

Last 4 digits of account number \$ \$ \$

Number Street

When was the debt incurred?

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Is the claim subject to offset?

- ☐ No
☐ Yes

☐

Priority Creditor's Name

Last 4 digits of account number \$ \$ \$

Number Street

When was the debt incurred?

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Is the claim subject to offset?

- ☐ No
☐ Yes

☐

Priority Creditor's Name

Last 4 digits of account number \$ \$ \$

Number Street

When was the debt incurred?

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Type of PRIORITY unsecured claim:

- ☐ Domestic support obligations
☐ Taxes and certain other debts you owe the government
☐ Claims for death or personal injury while you were intoxicated
☐ Other. Specify

Is the claim subject to offset?

- ☐ No
☐ Yes

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 2: List All of Your NONPRIORITY Unsecured Claims

3. Do any creditors have nonpriority unsecured claims against you?

- ☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.
☐ Yes

4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.1

Nonpriority Creditor's Name

Last 4 digits of account number

Total claim

\$

When was the debt incurred?

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

4.2

Nonpriority Creditor's Name

Last 4 digits of account number

\$

When was the debt incurred?

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

4.3

Nonpriority Creditor's Name

Last 4 digits of account number

\$

When was the debt incurred?

Number Street

City State ZIP Code

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 2: Your NONPRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.

Total claim

☐

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

☐

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

☐

Nonpriority Creditor's Name

Number Street

City State ZIP Code

Who incurred the debt? Check one.

- ☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another

☐ Check if this claim is for a community debt

Is the claim subject to offset?

- ☐ No
☐ Yes

Last 4 digits of account number

\$

When was the debt incurred?

As of the date you file, the claim is: Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

- ☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☐ Other. Specify

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

Name

Number Street

City State ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

On which entry in Part 1 or Part 2 did you list the original creditor?

Line ____ of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
☐ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number ____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

	Total claim
Total claims from Part 1	
6a. Domestic support obligations	6a. \$
6b. Taxes and certain other debts you owe the government	6b. \$
6c. Claims for death or personal injury while you were intoxicated	6c. \$
6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$
6e. Total. Add lines 6a through 6d.	6e. \$

	Total claim
Total claims from Part 2	
6f. Student loans	6f. \$
6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$
6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$
6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$
6j. Total. Add lines 6f through 6i.	6j. \$

Fill in this information to identify your case:

Debtor
First Name Middle Name Last Name

Debtor 2
(Spouse If filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number
(If known)

☐ Check if this is an
amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?
☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
☐ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

2.1

Name
Number Street
City State ZIP Code

2.2

Name
Number Street
City State ZIP Code

2.3

Name
Number Street
City State ZIP Code

2.4

Name
Number Street
City State ZIP Code

2.5

Name
Number Street
City State ZIP Code

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease

What the contract or lease is for

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

2.

Name

Number Street

City State ZIP Code

Fill in this information to identify your case:

Debtor 1 VINCENT IRE WILFRED
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number
(If known)

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

☐ No

☐ Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

☐ No. Go to line 3.

☒ Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

☐ No

☐ Yes. In which community state or territory did you live? CALIFORNIA Fill in the name and current address of that person.

TRACIE GREATHOUSE
Name of your spouse, former spouse, or legal equivalent

6116 ROBERTS PL.
Number Street

ETIWANDA CA 91739
City State ZIP Code

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3.1

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.2

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

3.3

Name

Number Street

City State ZIP Code

☐ Schedule D, line _____

☐ Schedule E/F, line _____

☐ Schedule G, line _____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Additional Page to List More Codebtors

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

3_

Name
Number Street
City State ZIP Code

- ☐ Schedule D, line _____
☐ Schedule E/F, line _____
☐ Schedule G, line _____

Fill in this information to identify your case:

Debtor 1 VINCENT IRE WILFRED
First Name Middle Name Last Name

Debtor 2
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: Central District of California

Case number
(If known) _____

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

12/15

Official Form 106I

Schedule I: Your Income

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	COMMERCIAL DRIVER	INSURANCE SALES
Employer's name	FSC TRANS	ICESSLER ALAIR
Employer's address	146 E. 49TH ST Number Street	12487 N. MAIN ST Number Street
	SAN BERNARDINO CA 92404 City State ZIP Code	RANCHO CUCAMONGA CA 91739 City State ZIP Code
How long employed there?	10 MONTHS	3 yrs

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	\$12000	\$3840
3. Estimate and list monthly overtime pay.	+\$0	+\$0
4. Calculate gross income. Add line 2 + line 3.	\$12000	\$3840

Debtor 1 VINCENT IRE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

Copy line 4 here..... → 4.

For Debtor 1

For Debtor 2 or
non-filing spouse

\$12,000

\$3,840

5. List all payroll deductions:

5a. Tax, Medicare, and Social Security deductions

5a. \$ 0

\$ 156

5b. Mandatory contributions for retirement plans

5b. \$ 0

\$ 0

5c. Voluntary contributions for retirement plans

5c. \$ 0

\$ 0

5d. Required repayments of retirement fund loans

5d. \$ 0

\$ 0

5e. Insurance

5e. \$ 0

\$ 0

5f. Domestic support obligations

5f. \$ 0

\$ 0

5g. Union dues

5g. \$ 0

\$ 0

5h. Other deductions. Specify: Medical, Dental, Vision

5h. + \$ 0

+ \$ 106.00

6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.

6. \$ 0

\$ 0

7. Calculate total monthly take-home pay. Subtract line 6 from line 4.

7. \$ 12,000

\$ 3,532.00

8. List all other income regularly received:

8a. Net income from rental property and from operating a business, profession, or farm

Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.

8a. \$ 0

\$ 0

8b. Interest and dividends

8b. \$ 0

\$ 0

8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive

Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.

8c. \$ 0

\$ 0

8d. Unemployment compensation

8d. \$ 0

\$ 0

8e. Social Security

8e. \$ 0

\$ 0

8f. Other government assistance that you regularly receive

Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.

Specify: _____

8f. \$ 0

\$ 0

8g. Pension or retirement income

8g. \$ 0

\$ 0

8h. Other monthly income. Specify: _____

8h. + \$ 0

+ \$ 0

9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.

9. \$ 0

\$ 0

10. Calculate monthly income. Add line 7 + line 9.

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.

10. \$ 12,000

+ \$ 3,532

= \$ 15,532

11. State all other regular contributions to the expenses that you list in Schedule J.

Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.

Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.

Specify: _____

11. + \$ 0

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.

Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies

12. \$ 15,532

Combined
monthly income

13. Do you expect an increase or decrease within the year after you file this form?

☐ No

☒ Yes. Explain:

Increase in income from business activities

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: **Central District of California**

Case number
(If known) _____

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY _____

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

- ☐ No. Go to line 2.
- ☐ Yes. Does Debtor 2 live in a separate household?

- ☐ No
- ☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

- ☐ No
- ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

- ☐ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I).

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses

4.

\$ 4323.19

4a.

\$

4b.

\$

225.00

4c.

\$

370

4d.

\$

0

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

Your expenses

5. **Additional mortgage payments for your residence**, such as home equity loans 5. \$ 0
6. **Utilities:**
- 6a. Electricity, heat, natural gas 6a. \$ 3400
- 6b. Water, sewer, garbage collection 6b. \$ 220
- 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$ 366
- 6d. Other. Specify: _____ 6d. \$ _____
7. **Food and housekeeping supplies** 7. \$ 680
8. **Childcare and children's education costs** 8. \$ 120
9. **Clothing, laundry, and dry cleaning** 9. \$ 400
10. **Personal care products and services** 10. \$ 150
11. **Medical and dental expenses** 11. \$ 140
12. **Transportation.** Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$ 225
13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \$ 50
14. **Charitable contributions and religious donations** 14. \$ 150
15. **Insurance.**
Do not include insurance deducted from your pay or included in lines 4 or 20.
- 15a. Life insurance 15a. \$ 0
- 15b. Health insurance 15b. \$ 225
- 15c. Vehicle insurance 15c. \$ 169
- 15d. Other insurance. Specify: _____ 15d. \$ _____
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: _____ 16. \$ 0
17. **Installment or lease payments:**
- 17a. Car payments for Vehicle 1 17a. \$ 0
- 17b. Car payments for Vehicle 2 17b. \$ 0
- 17c. Other. Specify: _____ 17c. \$ _____
- 17d. Other. Specify: _____ 17d. \$ _____
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$ 0
19. **Other payments you make to support others who do not live with you.**
Specify: _____ 19. \$ 400
20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**
- 20a. Mortgages on other property 20a. \$ 0
- 20b. Real estate taxes 20b. \$ 0
- 20c. Property, homeowner's, or renter's insurance 20c. \$ 0
- 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0
- 20e. Homeowner's association or condominium dues 20e. \$ 0

Debtor 1

VINCENT IRE WILFRED
First Name Middle Name Last Name

Case number (if known)

21. Other. Specify: _____

21. +\$ _____

22. Calculate your monthly expenses.

22a. Add lines 4 through 21.

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22c. Add line 22a and 22b. The result is your monthly expenses.

22a.

\$ 8,032.19

22b.

\$

22c.

\$ 8,032.19

23. Calculate your monthly net income.

23a. Copy line 12 (your combined monthly income) from Schedule I.

23b. Copy your monthly expenses from line 22c above.

23c. Subtract your monthly expenses from your monthly income.
The result is your monthly net income.

23a.

\$ 15,532

23b.

-\$ 8,032

23c.

\$ 7,500

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☒ Yes.

Explain here:

Pay off bills that are presently being paid for minor debt

Fill in this information to identify your case:

Debtor 1 _____
First Name Middle Name Last Name

Debtor 2 _____
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: _____ District of _____

Case number _____
(If known)

Check if this is:

- ☐ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J-2

Schedule J-2: Expenses for Separate Household of Debtor 2

12/15

Use this form for Debtor 2's separate household expenses ONLY IF Debtor 1 and Debtor 2 maintain separate households. If Debtor 1 and Debtor 2 have one or more dependents in common, list the dependents on both Schedule J and this form. Answer the questions on this form only with respect to expenses for Debtor 2 that are not reported on Schedule J. Be as complete and accurate as possible. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Do you and Debtor 1 maintain separate households?

- ☐ No. Do not complete this form.
- ☐ Yes

2. Do you have dependents?

Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.

Do not state the dependents' names.

- ☐ No
- ☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 2:

Dependent's age

Does dependent live with you?

- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes
- ☐ No
- ☐ Yes

3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?

- ☐ No
- ☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

- 4a. Real estate taxes
- 4b. Property, homeowner's, or renter's insurance
- 4c. Home maintenance, repair, and upkeep expenses
- 4d. Homeowner's association or condominium dues

Your expenses

4. \$ _____

4a. \$ _____

4b. \$ _____

4c. \$ _____

4d. \$ _____

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Your expenses

5. **Additional mortgage payments for your residence**, such as home equity loans 5. \$
6. **Utilities:**
 - 6a. Electricity, heat, natural gas 6a. \$
 - 6b. Water, sewer, garbage collection 6b. \$
 - 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$
 - 6d. Other. Specify: 6d. \$
7. **Food and housekeeping supplies** 7. \$
8. **Childcare and children's education costs** 8. \$
9. **Clothing, laundry, and dry cleaning** 9. \$
10. **Personal care products and services** 10. \$
11. **Medical and dental expenses** 11. \$
12. **Transportation.** Include gas, maintenance, bus or train fare.
Do not include car payments. 12. \$
13. **Entertainment, clubs, recreation, newspapers, magazines, and books** 13. \$
14. **Charitable contributions and religious donations** 14. \$
15. **Insurance.**
Do not include insurance deducted from your pay or included in lines 4 or 20.
 - 15a. Life insurance 15a. \$
 - 15b. Health insurance 15b. \$
 - 15c. Vehicle insurance 15c. \$
 - 15d. Other insurance. Specify: 15d. \$
16. **Taxes.** Do not include taxes deducted from your pay or included in lines 4 or 20.
Specify: 16. \$
17. **Installment or lease payments:**
 - 17a. Car payments for Vehicle 1 17a. \$
 - 17b. Car payments for Vehicle 2 17b. \$
 - 17c. Other. Specify: 17c. \$
 - 17d. Other. Specify: 17d. \$
18. **Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).** 18. \$
19. **Other payments you make to support others who do not live with you.**
Specify: 19. \$
20. **Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.**
 - 20a. Mortgages on other property 20a. \$
 - 20b. Real estate taxes 20b. \$
 - 20c. Property, homeowner's, or renter's insurance 20c. \$
 - 20d. Maintenance, repair, and upkeep expenses 20d. \$
 - 20e. Homeowner's association or condominium dues 20e. \$

Debtor 1

First Name Middle Name Last Name

Case number (if known)

21. **Other.** Specify: _____

21. +\$ _____

22. **Your monthly expenses.** Add lines 5 through 21.

The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.

22. \$ _____

23. Line not used on this form.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☐ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Debtor 2

(Spouse, if filing)

First Name Middle Name Last Name

United States Bankruptcy Court for the: District of

Case number
(if known)

☐ Check if this is an
amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and
Signature (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and
that they are true and correct.

Signature of Debtor 1

Signature of Debtor 2

Date

MM / DD / YYYY

Date

MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1 VINCENT IKE WILFRED
First Name Middle Name Last Name
Debtor 2
(Spouse, if filing) First Name Middle Name Last Name
United States Bankruptcy Court for the: Central District of California
Case number
(If known)

☐ Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

- ☒ Married
☐ Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

- ☒ No
☐ Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:

Dates Debtor 1
lived there

Debtor 2:

Dates Debtor 2
lived there

6116 ROBERTS PL
Number Street

From _____
To _____

☐ Same as Debtor 1

Number Street

From _____
To _____

ETIWANDA CA 91739
City State ZIP Code

City State ZIP Code

☐ Same as Debtor 1

☐ Same as Debtor 1

Number Street

From _____
To _____

Number Street

From _____
To _____

City State ZIP Code

City State ZIP Code

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- ☐ No
☒ Yes. Make sure you fill out *Schedule H: Your Codebtors* (Official Form 106H).

Part 2: Explain the Sources of Your Income

Debtor 1

First Name Middle Name Last Name

Case number (if known)

4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- ☐ No
☒ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For last calendar year: (January 1 to December 31, _____)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
For the calendar year before that: (January 1 to December 31, _____)	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

5. Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- ☐ No
☐ Yes. Fill in the details.

	Debtor 1	Debtor 2
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:		
For last calendar year: (January 1 to December 31, _____)		
For the calendar year before that: (January 1 to December 31, _____)		

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

- ☒ **No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

- ☐ **Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

☐ Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Creditor's Name		\$	\$	<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
City State ZIP Code				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other
Creditor's Name		\$	\$	<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
City State ZIP Code				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other
Creditor's Name		\$	\$	<input type="checkbox"/> Mortgage
Number Street				<input type="checkbox"/> Car
				<input type="checkbox"/> Credit card
				<input type="checkbox"/> Loan repayment
City State ZIP Code				<input type="checkbox"/> Suppliers or vendors
				<input type="checkbox"/> Other

Debtor 1

VINCENT IRE WILFRED
First Name Middle Name Last Name

Case number (if known)

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

☒ No

☐ Yes. List all payments to an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

☒ No

☐ Yes. List all payments that benefited an insider.

Insider's Name	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				
Insider's Name		\$	\$	
Number Street				
City State ZIP Code				

Debtor 1

First Name Middle Name Last Name

Case number (if known)

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

☐ No

☒ Yes. Fill in the details.

Nature of the case	Court or agency	Status of the case
Case title <u>JOHNSON V. WILFRED</u>	<u>SUPERIOR COURT</u> Court Name	<input checked="" type="checkbox"/> Pending
	<u>OF COUNTY OF SAN BER</u>	<input type="checkbox"/> On appeal
Case number <u>CIVDS 1</u>	Number Street	<input type="checkbox"/> Concluded
	<u>SAN BERNARDINO</u>	
	City State ZIP Code	
Case title <u>WILFRED V. VIJAYRAGHAVAN</u>	<u>SUPERIOR COURT OF</u> Court Name	<input checked="" type="checkbox"/> Pending
	<u>SANDIEGO NORTH</u>	<input type="checkbox"/> On appeal
Case number	Number Street	<input type="checkbox"/> Concluded
	<u>VISTA CA</u>	
	City State ZIP Code	

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

☒ No. Go to line 11.

☐ Yes. Fill in the information below.

Describe the property	Date	Value of the property
Creditor's Name		\$
Number Street		
City State ZIP Code		
Explain what happened		
<input type="checkbox"/> Property was repossessed.		
<input type="checkbox"/> Property was foreclosed.		
<input type="checkbox"/> Property was garnished.		
<input type="checkbox"/> Property was attached, seized, or levied.		
Describe the property	Date	Value of the property
Creditor's Name		\$
Number Street		
City State ZIP Code		
Explain what happened		
<input type="checkbox"/> Property was repossessed.		
<input type="checkbox"/> Property was foreclosed.		
<input type="checkbox"/> Property was garnished.		
<input type="checkbox"/> Property was attached, seized, or levied.		

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

☒ No

☐ Yes. Fill in the details.

Creditor's Name	Describe the action the creditor took	Date action was taken	Amount
Number Street			\$
City State ZIP Code			
Last 4 digits of account number: XXXX- _____			

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

☐ No

☐ Yes

Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

☒ No

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift			\$
Number Street			\$
City State ZIP Code			
Person's relationship to you			

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

☒ No

☐ Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities
that total more than \$600

Describe what you contributed

Date you
contributed

Value

Charity's Name

\$ _____

\$ _____

Number Street

City State ZIP Code

Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

☒ No

☐ Yes. Fill in the details.

Describe the property you lost and
how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance
claims on line 33 of *Schedule A/B: Property*.

Date of your
loss

Value of property
lost

\$ _____

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

☒ No

☐ Yes. Fill in the details.

Description and value of any property transferred

Date payment or
transfer was
made

Amount of payment

Person Who Was Paid

Number Street

\$ _____

\$ _____

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

Debtor 1

VINCENT THE WILFRED
First Name Middle Name Last Name

Case number (if known)

Description and value of any property transferred

Date payment or
transfer was made

Amount of
payment

Person Who Was Paid

Number Street

City State ZIP Code

Email or website address

Person Who Made the Payment, if Not You

\$

\$

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

- ☒ No
☐ Yes. Fill in the details.

Description and value of any property transferred

Date payment or
transfer was
made

Amount of payment

Person Who Was Paid

Number Street

City State ZIP Code

\$

\$

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

- ☒ No
☐ Yes. Fill in the details.

Description and value of property
transferred

Describe any property or payments received
or debts paid in exchange

Date transfer
was made

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

Person Who Received Transfer

Number Street

City State ZIP Code

Person's relationship to you

Debtor 1 **VINCENT** **IKE** **WILFRED**
First Name Middle Name Last Name

Case number (if known) _____

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

- ☒ No
☐ Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date transfer was made

Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

- ☒ No
☐ Yes. Fill in the details.

Name of Financial Institution	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Number Street City State ZIP Code	XXXX- - - -	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$
Name of Financial Institution Number Street City State ZIP Code	XXXX- - - -	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other		\$

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

- ☐ No
☐ Yes. Fill in the details.

Name of Financial Institution	Who else had access to it?	Describe the contents	Do you still have it?
Number Street City State ZIP Code	Name Number Street City State ZIP Code		<input type="checkbox"/> No <input type="checkbox"/> Yes

Debtor 1

VINCENT IRE WILFRED

First Name Middle Name Last Name

Case number (if known)

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

- ☒ No
☐ Yes. Fill in the details.

Who else has or had access to it?

Describe the contents

Do you still have it?

- ☐ No
☐ Yes

Name of Storage Facility

Name

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.

- ☒ No
☐ Yes. Fill in the details.

Where is the property?

Describe the property

Value

Owner's Name

\$

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Part 10: Give Details About Environmental Information

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Fill in the details.

Governmental unit

Environmental law, if you know it

Date of notice

Name of site

Governmental unit

Number Street

Number Street

City State ZIP Code

City State ZIP Code

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Case number (if known)

25. Have you notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Fill in the details.

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
	City State ZIP Code		
City	State ZIP Code		

26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

- ☐ No
☐ Yes. Fill in the details.

Court or agency	Nature of the case	Status of the case
Case title		<input type="checkbox"/> Pending
Court Name		<input type="checkbox"/> On appeal
Number Street		<input type="checkbox"/> Concluded
Case number	City State ZIP Code	

Part 11: Give Details About Your Business or Connections to Any Business

27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?

- ☐ Sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)
☐ A partner in a partnership
☐ An officer, director, or managing executive of a corporation
☐ An owner of at least 5% of the voting or equity securities of a corporation

- ☒ No. None of the above applies. Go to Part 12.
☐ Yes. Check all that apply above and fill in the details below for each business.

Describe the nature of the business		Employer Identification number
Business Name		Do not include Social Security number or ITIN.
Number Street		EIN: -
	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To
Describe the nature of the business		Employer Identification number
Business Name		Do not include Social Security number or ITIN.
Number Street		EIN: -
	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To

Debtor 1 **VINCENT IKE WILKINSON**
First Name Middle Name Last Name

Case number (if known) _____

Describe the nature of the business

Business Name _____

Number Street _____

City State ZIP Code _____

Describe the nature of the business

Employer Identification number
Do not include Social Security number or ITIN.

EIN: _____

Name of accountant or bookkeeper

Dates business existed

From _____ To _____

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

- ☐ No
- ☐ Yes. Fill in the details below.

Date issued

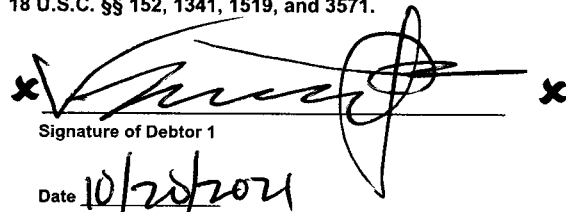
Name _____ MM / DD / YYYY

Number Street _____

City State ZIP Code _____

Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

x  x

Signature of Debtor 1

Date 10/28/2021

Signature of Debtor 2

Date _____

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- ☒ No
- ☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

B2800 (Form 2800) (12/15)

United States Bankruptcy Court
Central District of California

In re VINCENT IKE WILFREID
Debtor

Case No. _____

Chapter 11 Subchapter V

DISCLOSURE OF COMPENSATION OF BANKRUPTCY PETITION PREPARER

[Must be filed with the petition if a bankruptcy petition preparer prepares the petition. 11 U.S.C. § 110(h)(2).]

1. Under 11 U.S.C. § 110(h), I declare under penalty of perjury that I am not an attorney or employee of an attorney, that I prepared or caused to be prepared one or more documents for filing by the above-named debtor(s) in connection with this bankruptcy case, and that compensation paid to me within one year before the filing of the bankruptcy petition, or agreed to be paid to me, for services rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For document preparation services I have agreed to accept..... \$ _____

Prior to the filing of this statement I have received..... \$ _____

Balance Due..... \$ _____

2. I have prepared or caused to be prepared the following documents (itemize):
and provided the following services (itemize):

3. The source of the compensation paid to me was:
☐ Debtor ☐ Other (specify)

4. The source of compensation to be paid to me is:
☐ Debtor ☐ Other (specify)

5. The foregoing is a complete statement of any agreement or arrangement for payment to me for preparation of the petition filed by the debtor(s) in this bankruptcy case.

6. To my knowledge no other person has prepared for compensation a document for filing in connection with this bankruptcy case except as listed below:

NAME

SOCIAL SECURITY NUMBER

Signature

Social Security number of bankruptcy
petition preparer*

Date

Printed name and title, if any, of
Bankruptcy Petition Preparer

Address

* If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer. (Required by 11 U.S.C. § 110).

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Fill in this information to identify the case:

Debtor 1

VINCENT IKE WILFRED
First Name Middle Name Last Name

Debtor 2

(Spouse, if filing)

First Name Middle Name Last Name

United States Bankruptcy Court for the: District of

Case number
(If known)

Chapter

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 2. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1: Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

The bankruptcy petition preparer _____ has notified me of
Name

any maximum allowable fee before preparing any document for filing or accepting any fee.

Signature of Debtor 1 acknowledging receipt of this notice

Date
MM / DD / YYYY

Signature of Debtor 2 acknowledging receipt of this notice

Date
MM / DD / YYYY

Debtor 1

VINCENT IRE WILFRED
First Name Middle Name Last Name

Case number (if known) _____

Part 2: Declaration and Signature of the Bankruptcy Petition Preparer

Under penalty of perjury, I declare that:

- ☒ I am a bankruptcy petition preparer or the officer, principal, responsible person, or partner of a bankruptcy petition preparer;
- ☒ I or my firm prepared the documents listed below and gave the debtor a copy of them and the *Notice to Debtor by Bankruptcy Petition Preparer* as required by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and
- ☒ if rules or guidelines are established according to 11 U.S.C. § 110(h) setting a maximum fee for services that bankruptcy petition preparers may charge, I or my firm notified the debtor of the maximum amount before preparing any document for filing or before accepting any fee from the debtor.

Printed name _____ Title, if any _____ Firm name, if it applies _____
Number _____ Street _____
City _____ State _____ ZIP Code _____ Contact phone _____

I or my firm prepared the documents checked below and the completed declaration is made a part of each document that I check:
(Check all that apply.)

- | | | |
|---|---|---|
| <input type="checkbox"/> Voluntary Petition (Form 101) | <input type="checkbox"/> Schedule I (Form 106I) | <input type="checkbox"/> Chapter 11 Statement of Your Current Monthly Income (Form 122B) |
| <input type="checkbox"/> Statement About Your Social Security Numbers (Form 121) | <input type="checkbox"/> Schedule J (Form 106J) | <input type="checkbox"/> Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Form 122C-1) |
| <input type="checkbox"/> Summary of Your Assets and Liabilities and Certain Statistical Information (Form 106Sum) | <input type="checkbox"/> Declaration About an Individual Debtor's Schedules (Form 106Dec) | <input type="checkbox"/> Chapter 13 Calculation of Your Disposable Income (Form 122C-2) |
| <input type="checkbox"/> Schedule A/B (Form 106A/B) | <input type="checkbox"/> Statement of Financial Affairs (Form 107) | <input type="checkbox"/> Application to Pay Filing Fee in Installments (Form 103A) |
| <input type="checkbox"/> Schedule C (Form 106C) | <input type="checkbox"/> Statement of Intention for Individuals Filing Under Chapter 7 (Form 108) | <input type="checkbox"/> Application to Have Chapter 7 Filing Fee Waived (Form 103B) |
| <input type="checkbox"/> Schedule D (Form 106D) | <input type="checkbox"/> Chapter 7 Statement of Your Current Monthly Income (Form 122A-1) | <input type="checkbox"/> A list of names and addresses of all creditors (creditor or mailing matrix) |
| <input type="checkbox"/> Schedule E/F (Form 106E/F) | <input type="checkbox"/> Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Form 122A-1Supp) | <input type="checkbox"/> Other _____ |
| <input type="checkbox"/> Schedule G (Form 106G) | <input type="checkbox"/> Chapter 7 Means Test Calculation (Form 122A-2) | |
| <input type="checkbox"/> Schedule H (Form 106H) | | |

Bankruptcy petition preparers must sign and give their Social Security numbers. If more than one bankruptcy petition preparer prepared the documents to which this declaration applies, the signature and Social Security number of each preparer must be provided. 11 U.S.C. § 110.

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner _____

Social Security number of person who signed _____

Date _____
MM / DD / YYYY

Printed name _____

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner _____

Social Security number of person who signed _____

Date _____
MM / DD / YYYY

Printed name _____

B2030 (Form 2030) (12/15)

United States Bankruptcy Court
CENTRAL DISTRICT OF CALIFORNIA

In re

VINCENT IKE WILFRED

Case No. _____

Debtor

Chapter _____

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept \$ _____

Prior to the filing of this statement I have received \$ _____

Balance Due \$ _____

2. The source of the compensation paid to me was:

☐ Debtor

☐ Other (specify)

3. The source of compensation to be paid to me is:

☐ Debtor

☐ Other (specify)

4. ☐ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

B2030 (Form 2030) (12/15)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

Date

Signature of Attorney

Name of law firm

Fill in this information to identify your case:

Debtor 1	<u>VINCENT IKE WILFRED</u>		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: Central District of California			
Case number (If known)			

☐ Check if this is an amended filing

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

04/20

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Current Monthly Income

1. What is your marital and filing status? Check one only.

- ☐ Not married. Fill out Column A, lines 2-11.
- ☐ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- ☒ Married and your spouse is NOT filing with you. Fill out Column A, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>12,000</u>	\$ _____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0</u>	\$ _____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0</u>	\$ _____
5. Net income from operating a business, profession, or farm		
	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ <u>5,000</u>	\$ _____
Ordinary and necessary operating expenses	- \$ <u>2,300</u>	\$ _____
Net monthly income from a business, profession, or farm	\$ <u>0</u>	\$ _____
		Copy here → \$ _____
6. Net income from rental and other real property		
	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ <u>0</u>	\$ _____
Ordinary and necessary operating expenses	- \$ <u>0</u>	\$ _____
Net monthly income from rental or other real property	\$ <u>0</u>	\$ _____
		Copy here → \$ _____

Debtor 1 **VINCENT IRE WILFRED**
First Name Middle Name Last Name

Case number (if known) _____

	Column A Debtor 1	Column B Debtor 2
7. Interest, dividends, and royalties	\$ <u>0</u>	\$ _____
8. Unemployment compensation	\$ <u>0</u>	\$ _____

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:..... ↓

For you \$ _____

For your spouse \$ _____

9. **Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.

\$ 0 \$ _____

10. **Income from all other sources not listed above.** Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.

\$ 0 \$ _____

\$ 0 \$ _____

+ \$ 0 + \$ _____

Total amounts from separate pages, if any.

11. **Calculate your total current monthly income.**

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

\$ 14,700 + \$ _____ = \$ _____

Total current
monthly income

Part 2: Sign Below

By signing here, under penalty of perjury, I declare that the information on this statement and in any attachments is true and correct.

x [Signature]
Signature of Debtor 1

x _____
Signature of Debtor 2

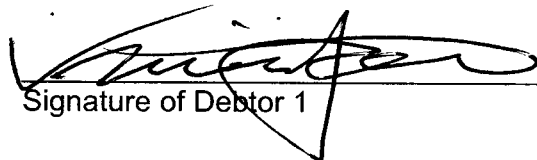
Date 10/20/2021
MM / DD / YYYY

Date _____
MM / DD / YYYY

<p>Attorney or Party Name, Address, Telephone & FAX Nos., State Bar No. & Email Address</p> <p>VINCENT IKE WILFRED 6116 ROBERTS PL ETIWANDA CA 91739</p> <p><input checked="" type="checkbox"/> Debtor(s) appearing without attorney <input type="checkbox"/> Attorney for Debtor</p>	<p>FOR COURT USE ONLY</p>
<p>UNITED STATES BANKRUPTCY COURT CENTRAL DISTRICT OF CALIFORNIA - **SELECT DIVISION**</p>	
<p>In re:</p> <p>VINCENT IKE WILFRED</p> <p>Debtor(s).</p>	<p>CASE NO.: CHAPTER:</p> <p>VERIFICATION OF MASTER MAILING LIST OF CREDITORS [LBR 1007-1(a)]</p>

Pursuant to LBR 1007-1(a), the Debtor, or the Debtor's attorney if applicable, certifies under penalty of perjury that the master mailing list of creditors filed in this bankruptcy case, consisting of 2 sheet(s) is complete, correct, and consistent with the Debtor's schedules and I/we assume all responsibility for errors and omissions.

Date: 10/20/2021


Signature of Debtor 1

Date: _____

Signature of Debtor 2 (joint debtor) (if applicable)

Date: _____

Signature of Attorney for Debtor (if applicable)

Select Portfolio Servicing
P.O. Box 65450
Salt Lake UT 84165-0450

2nd chance Mortgages Inc.
23580 Alessandro Blvd #9818
Moreno Valley, CA 92552

OCTAVIO JIMENEZ
962 E. D STREET
ONTARIO CA 91767

TFC CORPORATION
P.O. Box 579
SAN RAMON, CA 94583

JO BEN ENTERPRISES

P. O. Box 1246

SAN RAMON, CA 94583

LCSA

5500 S. EASTERN AVE

COMMERCE, CA 90040